

TRAINING-SCHOOLS FOR NURSES.

In another year the state law governing the registration of nurses will be operated so as to require a high school education of all candidates for the R. N. This step appears to be the beginning of the end of the proprietary hospital without a clinic service as a training-school for nurses. There is no more excuse for the existence of the proprietary training-school for nurses than for the proprietary medical school. The latter has practically ceased to exist, while the former thrives. No one in his right senses would even dream of founding a school for the training of physicians, in which all of the information required by the students is to be "picked up" as best it can be by contact with private patients only, under the care of a large group of physicians whose methods may vary as widely as their competence, and with no clinics, open demonstrations, or opportunity to make a thorough-going examination. Yet we are attempting to turn out the "trained" nurse by this very process.

And why? Because the proprietary hospital can not, unless it caters to the rich only, make both ends meet and at the same time give reasonable service unless it can get almost all of its nursing done for nothing or at a very nominal cost. To accomplish this economic feat the board of trustees opens, in connection with the hospital, what it is pleased to call a training-school for nurses, and a set of requirements for admission is formulated demanding, as a rule, a high school education and certain age and character qualifications on the part of candidates for the course. Suddenly it is found that there are not enough "girls to do the work" and the entrance requirements go by the board, perhaps forever. Thus we have, in full swing, the mediocre or poor proprietary training-school.

The exploiting of the pupil nurse in the proprietary hospitals was carried to such a degree that a successful movement for the inclusion of these women under the provisions of the eight hour law had its birth within the very walls of these institutions.

A superintendent of nurses who cannot keep up the numerical strength of the nursing-staff will last but a short time. But rarely, perhaps once in a moonshine, does the board of trustees, usually largely medical in its make-up, realize that it owes a very deep obligation to the women who elect to become pupils of the school. These women are led to believe that they are to receive a training which will enable them, upon graduation, to become full-fledged nurses. Fortunately (for the graduates) these women are most often of such mediocre mentality and education, frequently but little above the servant in type, that they actually think they have gotten a complete and efficient training. And the interesting feature is that this view is shared by many physicians. So, from the date of their graduation they are kept as continuously busy as their sisters, the graduates of a properly equipped, well conducted school. And worse yet, they receive the same remuneration as the well-trained women from the best training-school in the country.

It is slowly, but nevertheless surely, dawning upon us that a training-school for nurses is essentially and first of all a *school*, and that proper equipment, material, and the employment of recognized pedagogic methods are just as necessary to teach women nursing as they are to develop engineers, chemists or other professionals.

MEDICAL LEGISLATION.

On February 26, 1917, the California State Legislature will reconvene for the purpose of considering various bills that were presented during the first half of the session and also divers amendments. From this time on, more than ever before, is it important that those interested in medical laws be on the alert to prevent the passage of any vicious bills or any amendments. Already there have appeared amendments that are designed to do away with the protection of the public against half-baked, half-educated so-called doctors. There are three different "Drugless" crowds, each one of which is extremely active. For some time they have been busy circularizing the state and the Legislature, and a considerable part of their effort is exerted in the direction of their abusing what they are pleased to call the "Medical Trust." They all have active, paid lobbyists at work constantly, and as some of the legislators have felt all of the pressure from one direction, unless the regular medical profession gets busy the "Drugless" crowd are apt to accomplish their desires. One of these "Drugless" bills is fathered by a famous (?), universal specialist, who conducts a Turkish bath establishment and a regular emporium for the curing of all the ills of mankind! This bill is practically the same as the initiative measure which was defeated so decisively by the people at the election two years ago. Along with the small army of freak faddists, loudly clamoring for special legislation on behalf of their cults, there is a female lobbyist who seems to have the habit of appearing before the Legislature on behalf of some undesirable medical measure. Notwithstanding the fact that she has an M. D. degree, she had introduced amendments designed to give "reciprocity" (?) to everyone, including all classes of practitioners. For reasons heretofore given, the following bills are extremely undesirable and ought to be defeated:

Senate Bill No. 24 (Scott). A special "Drugless" bill.

Senate Bill No. 279 (Inmann). A special "Chiropractic" bill.

Senate Bill No. 105 (Ballard). A special "Chiropractic" bill, introduced at the request of the head of a notorious Chiropractic institution which has been in the limelight more or less constantly.

Senate Bill No. 760 (Stuckenbruck). A vicious amendment giving special privileges to one of the freak cults and extending to an almost unlimited degree the Reciprocity Act.

Assembly Bill No. 95 (Argobright). Special legislation on behalf of Chiropractors.

Assembly Bill No. 57 (Hilton). Special legislation on behalf of some of the "Drugless" crowd.

Senate Bill No. 110 (Luce). Places all health matters and also the regulation of the practicing of

Medicine, Dentistry, Optometry, and Embalming, under the supervision of three lay persons. The bill has been prepared with very great care and will receive strong backing; so unless sufficiently strong efforts are made to counteract the same there is danger that it will pass. It would be a calamity to deprive the State of the excellent services of the Board of Health, and all matters relating to licensure would be thrown into a terrible state of confusion.

There is no cult that professes to look after the sick and afflicted that is not already properly cared for by the present Medical Practice Act. The best interests of the public demand that before an individual is given a license to practice any system he must have a good basic education and a good training in properly equipped and properly conducted teaching institutions. If any "Drugless" practitioner can meet the reasonable educational requirements of the law he can obtain a "Drugless" practitioner's license, all that he has a right to demand. The better element amongst the "Drugless" practitioners are satisfied with the present arrangement. It is only those who have failed to pass the state examinations and those whose lack of training makes it certain that they could not pass, who are behind these movements to weaken the law. It does not matter what the system, sect, or cult the practitioner may claim to practice if he has the education and experience necessary to make diagnoses and to meet the various grave responsibilities that are apt to be placed upon the shoulders of anyone calling himself a physician.

The better element in the medical profession ought to be represented in Sacramento by a paid lobbyist. This question should be seriously considered at the meeting of the Council on March 3, as the Legislature will then be in session.

"A FOOL THERE WAS."

Under this caption, and signed "by the fool," appears a pithy discourse in the "Journal of the Outdoor Life" for January, 1917. It is commended to the studious attention of every reader of this Journal. In it are detailed the experiences of a man who contracted tuberculosis and went to the western plains for health. He improved, returned to his eastern home and promptly started on a course which ended in the re-appearance of the disease in himself, the death of two of his children from tuberculous meningitis, and the appearance of the pulmonary disease in another child and the wife. The story puts two burdens on the physician, the first to himself in his personal health, the second in his obligation to impress on patients the seriousness of tuberculosis and the danger of trifling with it.

The same apt title might well include another article in the same journal entitled, "On the Just and Unjust Alike." Here is told the story of three fools of a somewhat different type. The first was a lawyer with a vision, and the rare ability to make it come true. But when he was just ready for his crowning service to humankind, he found himself in the death grapple with the old enemy, the tubercle bacillus, which won

out because he was weakened by lack of time and attention to hygiene and health. The second was a doctor who "poignantly felt the tragedy of poverty, and dedicated his life to healing the men and women who could only pay him a pittance." "Of course he knew that a man needs recreation, and leisure and exercise. None knew that better than he. But somehow he deluded himself with the reflection that his work was too important to wait." He went the way of the lawyer. The third was a minister who was working sincerely for the welfare of man's soul and therefore did not spare himself. "Whenever reason told him that he could not hold out in his great work, he comforted himself with the thought that he was divinely chosen." All signs indicated that he was to be the greatest leader for uplift and reform and betterment of the poor that the world had seen, and then the tubercle took him.

The three fools had each his ideal and nearly mastered it. Each had great possibilities and staked his all on developing them. Each could have been a blessing to his generation and a benediction on the future, had he not overlooked one thing. Each knew that thing well and helped his fellows to realize it. Each fell before the tubercle bacillus because he had weakened his resistance by hard unremitting work, lack of recreation, rest, exercise, fresh air, sun and a little leisure. Each knew but did not do. And the sad tale continues that the world was the greater loser, much greater than the mere man who died. It lost all he might have done and should have done, and did not do because he allowed himself to fall prey to an enemy who is no respecter of persons and who considers not the motives of the man, or his ideals or his ability, or the need the world may have for him, but considers one thing, only—if perchance his body be weak to allow the subtle germ to gain foothold and take a yard for an inch until the unequal fight is done.

Let not our brethren of the professions longer lay on us the burden that we knew and did not do, much less that we knew and did not warn others. The greater loss is shown in the story of the "three fools," and happy he who reads and heeds as he runs.

OLEOMARGARINE OR BUTTER.

When the much-advertised high cost of living affects the actual nutrition of any large element of the population, it becomes thereby a problem of the public health to remedy the condition or find an alternative nutriment. This is illustrated in the efforts reported in the last two years to turn into food value such low caloric values as straw, hay, etc., and the introduction of new or artificial fats. Such a condition prevails to no small degree in this country in regard to fats and proteins, and is especially noted in the case of butter. The use of butter is without question restricted by its cost and to whatever extent it is used among the classes with very limited income, it is at the expense of other articles of food of equal or greater importance. Fortunately, however, there is a sub-